PTO/SB/01 (10-01)

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DECLARATION FOR UTILITY OR

Attorney D cket Number

DESIGI	N	First Nam d Inv nto	r Wanie	L Grizz E			
PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN					
		Application Number					
Declaration	Declaration	Filing Date		<u> </u>			
Submitted OR	Submitted after Initial	Art Unit		<u> </u>			
with Initial Filing	Filing (surcharge (37 CFR 1.16 (e))						
Tilling	required)	Examiner Name					
As the below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Grizzle Number Line W/ Kieu Wave Form							
(Title of the Invention)							
the specification of which							
is attached hereto							
OR -							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
as since states y priced on the microtal states and states are states are states and states are states are states and states are sta							
Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT							
international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
		(MINIODITITI)		YES NO			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Numb or Bar Code Label		OR Con	respondence address below			
Name Dan GrizzlE						
Address 9410 Romaine						
city Overland		State Mo.	ZIP 63114			
c untry USA Tele	phone 314-L	126-3256	Fax N/A			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Daniel Eugene Family Name Grizzle						
Inventor's Signature Carnel Eugene	Is il	<u>Je</u>	Date 8-3-2003			
Residence: City Overland	State MO	, Country USA	Citizenship American			
Malling Address 9410 Romaine						
chy Overland	State Mo	ZIP 63114	Country U.S.A.			
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Family Name or Surname						
Inventor's Signature			Date			
Residence: City	State	Country	Citizenship			
Mailing Address						
City	State	ZIP	Country			
Additional investor and being named on the support	emental Addition	nal Aventor(s) street(s) PTO/SB/	02A attached hereto.			